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SEP 21 2009

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7590

06/16/2009

Pauley Petersen & Erickson
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 Hoffman Estates, IL 60195

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Kevin D. Erickson		(Depositor's name)
KED CIK		(Signature)
16 SEPT. 2009		(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/791,563	03/02/2004	Jonathan Jutsen	OTFC-101-CIP	3115

TITLE OF INVENTION: COMPUTERIZED MANAGEMENT SYSTEM AND METHOD FOR MAINTENANCE PERFORMANCE EVALUATION AND IMPROVEMENT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	09/16/2009
EXAMINER	ART. UNIT	CLASS-SUBCLASS		01 FC:2501	755.00	OP
BOYCE, ANDRE D	3623	705-007000		02 FC:1504	300.00	OP
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363):				03 FC:4001	0.00	OP
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.						
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev. 03-02 or more recent) attached. Use of a Customer Number is required.						
2. For printing on the patent front page, list						
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Energetics Pty Ltd

North Sydney, Australia

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

Issue Fee
 Publication Fee (No small entity discount permitted)
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 The Director is hereby authorized to charge **19-3550** any deficiency, or credit any overpayment, to Deposit Account Number **19-3550** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

KED CIK

Date

16 SEPT. 2009

Typed or printed name

Kevin D. Erickson

Registration No.

38,736

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